PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/805,106			ing Date 19/2 00 4	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY				HER THAN ALL ENTITY	
Г	FOR	N	NUMBER FILED		NUMBER EXTRA			RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)	
\boxtimes	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A			N/A		1	N/A	770	
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A			N/A]	N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),	E or (q))	N/A		N/A			N/A			N/A		
TO (37	FAL CLAIMS CFR 1.16(i))		minus 20 =		•		П	x \$ =		OR	x s =		
INE (37	EPENDENT CLAIM CFR 1.16(h))	S	minus 3 = *					x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addi	If the specification and drawi sheets of paper, the applicat is \$250 (\$125 for small entity additional 50 sheets or fracti 35 U.S.C. 41(a)(1)(G) and 3			n size fee due for each thereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))										1			
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		1	TOTAL	770	
	APP	OED – PA (Column		OTHER THAN SMALL ENTITY OR SMALL ENTITY									
AMENDMENT	01/16/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOU PAID FOR	JSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	* 36	Minus	 36		= 0	П	x \$ =		OR	X \$52=	0	
	Independent (37 CFR 1,16(h))	• 3	Minus	···3		= 0	П	x \$ =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1.16(s))						П						
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
(Column 1) (Column 2) (Column 3)													
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOL PAID F	ER JSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16(i))		Minus	**		=	П	x \$ =		OR	x s =		
Σ	Independent (37 CFR 1,16(h))		Minus	**			П	x \$ =		OR	x \$ =		
핍	Application Size Fee (37 CFR 1.16(s))						П]			
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))									OR			
										OR	TOTAL ADD'L FEE		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For "N THIS SPACE is less than 20, enter "20". ** If the "Highest Number Previously Paid For "N THIS SPACE is less than 3, enter "3". **The "Highest Number Previously Paid For "(Total or independent) is the highest number found in the appropriate box in column 1.												

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